U.S. Patent and Trademark Office: U.S. Department of 1995, for persons are regulard to respond to a collection of knowation unless it displays a valid OMB continuing number.

PATENT APPLICATION FEE DETERMINATION RESIDED. PATENT APPLICATION FEE DETERMINATION RESERVE Bubstitute for Form PTO-875 Application or Docket Humber 3 APPLICATION AS FILED - PART ! (Column 1) OTHER THAN". (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BABIQ FEE (\$7 OFR 1.15(a), (b), or (o)) RATE (\$) FEE (\$) N/A RATE (\$) FEE (\$) NA · N/A SEARCH FEE N/A (87 OFR 1.16(K), (0, or (my) N/A N/A N/A EXAMINATION FEE (87 OFR 1.16(0), (p), or (q)) N/A N/A N/A: ΝÀ TOTAL CLAIMS NA (97 CFR 1.16(I)) minus 20 = 28 INDEPENDENT CLAIMS OR 50 (37 OFR 1.16(h)) minus 8 = x 105 = If the specification and drawings exceed 100 210. APPLICATION SIZE sheets of paper, the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See (37 CFR 1.16(8)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 OFR 1.18(1)) 185 370 If the difference in column 1 is less than zero, enter *0* in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) OTHER THAN SMALL ENTITY CLAIMS . REMAINING HIGHEST NUMBER PREVIOUSLY SMALL ENTITY PRESENT AFTER RATE (\$) AGDI-RATE (\$) EXTRA ADDL: MENDMENT PAID FOR TIONAL FEE (\$) TIONAL FEE (\$) Total Minus x 25 Independent Of OFR 1,16(N) рк Minus .50 Œ x 105 = Application Size Fee (37 CFR 1.16(s)) 210 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II)) 185 340 OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 1) (Column 2) (Columni 3) CLAIMS HIGHEST œ REMAINING NUMBER PREVIOUSLY PRESENT AFTER AMENDMENT RATÉ (\$) ADDI-RATE (\$) EXTRA ADDI-TIONAL FEE (\$) PAID FOR ũ TIONAL FEE (\$) Total CFR 1.1600 Minus 202 x 25 independent (37 OFR: 1.160H) Minus × 50 OR × 105 Application Size Fee (37 CFR 1.16(s)) x 210 OR. FIRST PRESENTATION OF MULTIPLE DEPENDENT OLAIM (87 OFR 1.160) 185 OR If the entry in column 1 is less than the entry in column 2, write "0" th column 3.

If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

This Collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing file burden, should be sent to the Chief knormation Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

Department for Patents, P.O. Box 1460, Alexandria, VA 22313-1450. TOTAL TOTAL ADD'L FEE